PTO/SB/17 (10-08) Approved for use through 06/30/2010. OMB 0651-0032

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Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number Complete if Known Effective on 12/08/2004. 09/445,289-Conf. #9774 Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). **Application Number** FEE TRANSMITTAL May 11, 2000 Filing Date Galina V. Mukamolova First Named Inventor For FY 2009 **Examiner Name** S. J. N. Devi Applicant claims small entity status. See 37 CFR 1.27 1645 Art Unit TOTAL AMOUNT OF PAYMENT (\$) 555.00 60261(49946) Attorney Docket No. METHOD OF PAYMENT (check all that apply) Check Credit Card None Money Order Other (please identify): x Deposit Account Deposit Account Number:_ 04-1105 Deposit Account Name: Edwards Angell Palmer & Dodge LLP For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) x Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayments of Credit any overpayments fee(s) under 37 CFR 1.16 and 1.17 **FEE CALCULATION** 1. BASIC FILING, SEARCH, AND EXAMINATION FEES

	FILING FEES		SEARCH FEES		EXAMINATION FEES			
Application Type	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees Paid (\$)	
Utility	330	165	540	270	220	110		
Design	220	110	100	50	140	70		
Plant	220	110	330	165	170	85		
Reissue	330	165	540	270	650	325		
Provisional	220	110	0	0	0	0		
2 EVCESS OF AIM FEES						-	0	

2. EXCESS CLAIM FEES **Small Entity** Fee (\$) Fee (\$) Fee Description Each claim over 20 (including Reissues) 52 26 Each independent claim over 3 (including Reissues) 220 110 Multiple dependent claims 390 195

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	<u>Multiple De</u>	<u>pendent Claims</u>
- 40	or HP >	· =		Fee (\$)	Fee Paid (\$)
HP = highest number	of total claims paid for, if	greater than 20.			
Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)		

HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

- 3 or HP =_

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	<u>Numbe</u>	r of each additional 50 or fraction thereof	Fee (\$)		Fee Paid (\$)
100	=	/50 =	(round up to a whole number) x		= _	
4. OTHER FEE(S)						Fees Paid (\$)
Non-English Specif	fication, \$130 fee	e (no small e	ntity discount)			
Other (e.g., late filing	ng surcharge): 22	253 Extensi	on for response within third month			555.00

SUBMITTED BY			
Signature	Registra	Telephone	(617) 517-5580
Name (Print/Type)	Melissa Hunter-Ensor, Ph.D., Esq.	Date	July 6, 2009